

**S/N 10/072,605**

**PATENT**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Michael J. Renn et al.  
Serial No.: 10/072,605  
Filed: February 5, 2002  
Title: Direct WriteTM System

Examiner: Julian D. Huffman  
Group Art Unit: 2853  
Docket: ODC2000-1-CIPB

---

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In compliance with the duty imposed by 37 C.F.R. § 1.56, and in accordance with 37 C.F.R. §§ 1.97 *et. seq.*, the referenced materials are brought to the attention of the Examiner for consideration in connection with the above-identified patent application. Applicant respectfully requests that this Supplemental Information Disclosure Statement be entered and the document listed on the attached Form 1449 be considered by the Examiner and made of record. Pursuant to the provisions of MPEP 609, Applicants request that a copy of the 1449 form, initialed as being considered by the Examiner, be returned to the Applicants with the next official communication.

Since this application was filed prior to June 30, 2003, a copy of the cited reference is enclosed.

This Information Disclosure Statement is being filed pursuant to 37 CFR 1.97 (c), since the Examiner has re-opened prosecution with the non-final Office Action dated July 6, 2005. The required fee under 37 C.F.R. § 1.17(p) is therefore enclosed.

The Examiner is invited to contact the Applicant's Representative at the below-listed telephone number if there are any questions regarding this communication.

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Serial No :10/072,605

Filing Date: February 5, 2002

Title: Direct Write™ System

---

Page 2

Dkt: ODC2000-1-CIPB

Respectfully submitted,

MICHAEL J. RENN

By his Representatives,


PEACOCK MYERS, P.C.

P.O. Box 26927

Albuquerque, New Mexico 87125-6927

Phone 505 998 1502

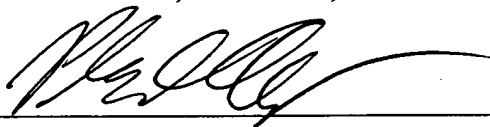
Date October 6, 2005

By   
Philip D. Askenazy  
Reg. No. 56,721

**CERTIFICATE UNDER 37 CFR 1.8:** The undersigned hereby certifies that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on this 6th day of October, 2005.

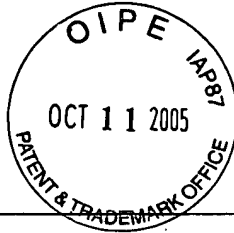
Philip D. Askenazy, Reg. No. 56,721

Name

  
Signature

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Substitute for form 1449A/PTO  
**INFORMATION DISCLOSURE  
STATEMENT BY APPLICANT**  
(Use as many sheets as necessary)



Complete if Known

Application Number	10/072,605
Filing Date	February 5, 2002
First Named Inventor	Renn, Michael
Group Art Unit	2853
Examiner Name	Julian D. Huffman

Sheet 1 of 1

Attorney Docket No: ODC2000-1-CIPB

**US PATENT DOCUMENTS**

Examiner Initial *	Cite No. *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		US-5,844,192	12/01/1998	Wright, Robert J., et al.	

**FOREIGN PATENT DOCUMENTS**

Examiner Initials*	Cite No. *	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>2</sup>
		Country Code - Number - Kind Code (if known)				

**OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS**

Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>

Filed: \_\_\_\_\_

**EXAMINER**

**DATE CONSIDERED**

Substitute Disclosure Statement Form (PTO-1449)

\* EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 808. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. <sup>1</sup> Applicant's unique citation designation number (optional) <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached